

DAMAGE ASSESSMENT Columbia County



DATE: PER		PERSO	ERSON REPORTING:												PAGE #:		
TIME RECEIVED: PERS		RSON RECEIVING:											of				
			BURNING	TUO	GAS LEAK	H2O LEAK	ELECTRIC	CHEMICAL	DAMAGED*	COLLAPSED	INJURED	TRAPPED	DEAD	ACCESS	NO ACCESS	ASSIGNMENT COMPLETED	
TIME	LOCATION/ADDRESS		FIRES		HAZARDS				STRUCTURES		PEOPLE		ROADS		/ X		

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Summary of all hazards in area - fill out this form on your way to Command Post and give it to Incident Command. (* for structure damage: h=heavy, m=moderate, l=light)

Incident Command: Choose an incident, put a slash in the assignment completed column, copy the address/location to the incident name section on Incident Briefing, and give Incident Briefing and Assignment Status to incident team leader. Copy address/location to Post-Incident Status and enter start time. When incident is complete, put a backslash in the assignment completed column and the incident end time on the Post-Incident Status form.